

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 OF 24

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NATIONAL RIGHT TO LIFE POLITICAL ACTION COMMITTEE**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Hoffman, Joseph, , ,**

Mailing Address 700 Douglas Ave #102

City  
Minneapolis

State  
MN

Zip Code  
55403

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Info Requested

Occupation (for Individual)  
Info Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 / 03 / 2019

Transaction ID : SA11AI.10471

Amount of Each Receipt this Period

400.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Koloze, Jeffrey J, , ,**

Mailing Address 10019 Granger Rd

City  
Garfield Heights

State  
OH

Zip Code  
44125

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
University of Phoenix

Occupation (for Individual)  
Professor, Campus College Chair

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 12 / 2019

Transaction ID : SA11AI.10492

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Koloze, Jeffrey J, , ,**

Mailing Address 10019 Granger Rd

City  
Garfield Heights

State  
OH

Zip Code  
44125

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
University of Phoenix

Occupation (for Individual)  
Professor, Campus College Chair

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 12 / 2019

Transaction ID : SA11AI.10493

Amount of Each Receipt this Period

100.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

600.00